REQUIREMENTS FOR EXEMPT OUT-OF-STATE COLLECTION AGENCY DESIGNATION

Visit our website at: www.hawaii.gov/dcca/pvl

Read entire requirement sheet. You are responsible for knowing and understanding these requirements. Retain this sheet for future reference.

WHO IS EXEMPT?

A collection agency may apply for designation as an exempt out-of-state collection agency; provided that the collection agency:

- 1. Is licensed or registered as a collection agency under the laws of a state that:
 - a) Regulates collections agencies; and
 - b) Does not require a Hawaii collection agency to obtain a license or register to collect debts in that state if the activities of the Hawaii collection agency are limited to those described in paragraphs 2, 3 and 4;
- 2. Is collecting debts on behalf of an out-of-state creditor;
- 3. Does not solicit or engage in collection activities for clients in this State; and
- 4. Only collects debts in this State using interstate communication methods, including telephone, facsimile, or mail.

REQUIRED DOCUMENTS

Complete the attached application and **SUBMIT**:

- 1. Verification that the collection agency holds a current license, permit, or registration to conduct business as a collection agency in another state that regulates collection agencies and reciprocates with Hawaii:
- Verification that the collection agency is in good standing with and has complied with the laws of THAT state, <u>including the MAINTENANCE of a BOND</u>, if <u>required</u>, and in the amount required by the state; and
- 3. An agreement in writing to comply with the requirements of sections 443B-9, 443B-15, 443B-16, 443B-17, 443B-18 and 443B-19; and
- 4. The required fees, **\$25** (non-refundable) application fee. Upon approval of an out-of-state collection agency exemption, the following compliance resolution fund (CRF) fee will be required:
 - \$55 if applying during July 1 of an odd-numbered year to June 30 of an even-numbered year: OR
 - \$110 if applying for a license during July 1 of an even-numbered year to June 30 of an odd-numbered year.

Please **submit** 2 separate checks: Application fee and CRF fee.

BIENNIAL RENEWAL

Every exempt out-of-state collection agency, regardless of issuance date, is subject to renewal on or before June 30 of each even-numbered year. Failure, neglect, or refusal to pay the renewal fee shall constitute a forfeiture of the registration. If you have not received a renewal application 30 days prior to the expiration date printed on your registration card, call (808) 586-3000 or write to our mailing address.

DELINQUENT REGISTRATION

Any collection agency which has failed to renew its registration may restore it by filing an application and payment of any delinquent renewal fees and a restoration fee.

Failure to restore a forfeited registration within sixty (60) days of forfeiture shall cause the registration to be terminated.

(CONTINUED ON BACK)

MAILING ADDRESS

Mail the completed application, fees and applicable documents to:

Collection Agenciessmf py
DCCA, PVL, Licensing Branch
P. O. Box 3469

Deliver to office location at:
1010 Richards Street, 1st floor
Honolulu, Hawaii 96813

Honolulu, Hawaii 96801 Honolulu, Hawaii 96801 Phone: (808) 586-3000

LAWS AND RULES

To obtain a copy of the collection agencies laws and rules (Chapter 443B, Hawaii Revised Statutes, and Chapter 112, Hawaii Administrative Rules), send a written request and \$1.25 payable to DCCA to: Cashier, Commerce and Consumer Affairs, P. O. Box 541, Honolulu, Hawaii 96809. Price subject to change without notice. Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Act may be purchased separately for 75¢.

The laws and rules are also posted on our website at: www.state.hi.us/dcca. Look under "Obtaining Information".

It is your responsibility to know and understand the laws and rules governing collection agencies.

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

Dept. of Commerce & Consumer Affairs APPLICATION FOR EXEMPT OUT-OF-STATE Collection Agencies COLLECTION AGENCY DESIGNATION 1010 Richards Street, P. O. Box 3469 Honolulu, Hawaii 96801 Please read the "Requirements for Exempt Out-of-State Collection Agency." Name of Applicant (Individual - First, Middle, LAST, or Name of Corporation, Partnership, Approved/Denied Date: LLC/LLP): Date Registered: Registration No. FOR OFFICE USE COLAX Trade Name or Business Name (if one will be used): Out-of-State Business Address: Mailing Address, if different from above: Indicate the type of Business Entity: Individual (Sole Owner) [Corporation [Partnership] [LLC [] LLP [1 Social Security Number (Individual): Phone No. (Include area code): Collection Agency License/Registration No. INDIVIDUAL APPLICANT (Residence Address): Phone No. (Include area code): PRINCIPAL COLLECTOR (Name of Principal Collector who is responsible for the direct Social Security Number: management and control of the daily operation of the office): Residence Address of Principal Collector: Phone No. (Include area code): CORPORATION, PARTNERSHIP, LLC, LLP List Name & Title Residence Address Residence Phone No. Social Security No. President/Partner/Manager or Member Vice President/Partner/Manager or Member Secretary/Partner/Manager or Member Treasurer/Partner/Manager or Member (Continued on Back) App 094 \$25 CRF 096 \$55/\$110

Service Fee BCF \$15

APPLICATION FOR EXEMPT OUT-OF-STATE COLLECTION AGENCY – (Cont.)

Name of Applicant:		Date:	
	e following questions pertain to the applicant, all officers, directors, pa S" responses on a separate sheet and include official documentation		<u>LL</u>
1)	Have you ever been associated in any capacity in the operation or b	ousiness of a collection agency? YES	NO
2)	Have you ever had any registration, license or permit revoked, susp subject to disciplinary action?		NO
3)	Is any disciplinary action pending or any licenses or registration being	ng investigated?YES	NO
4)	In the past 20 years, have you even been convicted of a crime in whosen annulled or expunged?		NO
5)	5) Will the agency's business be conducted in connection with any other business?YE		NO
mis	I certify that the answers and statements contained in this applica representation is grounds for refusal or subsequent revocation of reg	ation and the documents attached are true and correct. I understand istration (Section 710-1017, Hawaii Revised Statutes).	that b
	Date	Signature of Applicant	
		Print Your Name/Title	
		Signature of Principal Collector	

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Collection Agencies DCCA, PVL Licensing Branch 1010 Richards St., P.O. Box 3469 Honolulu, Hawaii 96801

To receive confirmation of your registration, fill in your name and m form. This confirmation will take about 3 weeks to process. The re	
NOTICE OF REGISTRATION	Professional and Vocational Licensing Division Department of Commerce and Consumer Affairs State of Hawaii
This is notification that you are registered as an EXEMP that a registration is processed.	T, OUT-OF-STATE COLLECTION AGENCY until such time
THIS NOTIFICATION IS VALID ONLY WHEN SIGNE	D BY THE EXECUTIVE OFFICER OF THE BOARD OR
PROGRAM.	
Print Name & Complete Mailing Address in Block Below:	REGISTRATION NO. COLAX-
	EFFECTIVE DATE
	EXPIRATION DATE 6/30/
	EVECUTIVE OFFICER
	EXECUTIVE OFFICER